

PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee preferations. maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Not	e: Use Block 1 for	any change of address)

23531 7590 SUITER WEST PC LLO 14301 FNB PARKWAY SUITE 220 OMAHA, NE 68154



Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)	Penny L. Flint
(Signature)	Kenny J. Hint
(Date)	July 26, 2004

	V	ENT& TRADEMIN	•	7	enny Z	Hint	(Signature)
		•		Ju	ly 26, 2	2004	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/050,084 TITLE OF INVENTION: S	01/14/2002 ELF-POLISHING AND TA	PPING RIVET A	A. L. Pepper Aasgaard 07/29/200		07/29/2004	ASA 01-2-1 HDEMESS2 00000018 19	4882 10050084
				1	01 FC:2501 02 FC:1504 03 FC:8001	665.00 DA 300.00 DA 30.00 DA	
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICAT	ION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665		\$30	00	\$965	10/13/2004
EXAM	MINER	ART UN	IIT	CLASS-SU	BCLASS]	
SAETHER,	FLEMMING	3677	677 411-029000		•		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent); **Dindividual** 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents an attorneys or agents an attorneys or agents an attorneys or agents an assignee attained attorneys or agents. If no name is listed, no name will be printed. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents attorneys or agents and the names of up to 2 registered patent attorneys or agents. If no name is 2 registered patent attorneys or agents and the names of up to 3 registered patent attorneys or agents. If no name is 3 registered patent attorneys or agents attorneys or agents. If no name is 3 registered patent attorneys or agents attorneys or agents. If no name is 3 registered patent attorneys or agents attorneys or agents. If no name is 3 registered patent attorneys or agents. If no name is 3 registered patent attorneys or agents. If no name is 3 registered patent attorneys or agents. If no name is 3 registered patent attorneys or agents. If no name is 3 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 re							
4a. The following fee(s) are	he following fee(s) are enclosed: 4b. Payment of Fee(s):						
X Issue Fee			☐ A check in the amount of the fee(s) is enclosed.				
D Publication Fee (No sr	mall entity discount permitted	i)	☐ Payment by credit card. Form PTO-2038 is attached.				
X Advance Order - # of	Copies 10		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-4882 (enclose an extra copy of this form).				
5. Change in Entity Status	(from status indicated above	;)		· · · · · · · ·			
a. Applicant claims SN	Applicant claims SMALL ENTITY status. See 37 CFR 1.27. • b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).						R 1.27(g)(2).
	is requested to apply the Issu sublication Fee (if required) we ords of the United States Pate						

(Authorized Signature) (Date) Reg.# 43,983 07/26/04

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.